Form	8879	
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Department of the Treasury Internal Revenue Service

## **IRS** e-file Signature Authorization

OMB No. 1545-0074

2018

Return completed Form 8879 to your ERO. (Don't send to the IRS.) ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpayer's name	Social security number	
HARIKRISHNA JADDA	793-45-7821	
Spouse's name	Spouse's social security numb	er
SIVAKUMARI NAGUBADI		
Part I Tax Return Information – Tax Year Ending December 3	31, 2018 (Whole dollars only)	
1 Adjusted gross income (Form 1040, line 7; Form 1040NR, line 35)	1	57,717.
2 Total tax (Form 1040, line 15; Form 1040NR, line 61)	2	3,666.
3 Federal income tax withheld from Forms W-2 and 1099 (Form 1040, lin	ie 16; Form 1040NR, line 62a) . <b>3</b>	6,138.
4 Refund (Form 1040, line 20a; Form 1040-SS, Part I, line 13a; Form 104		2,472.
5 Amount you owe (Form 1040, line 22; Form 1040NR, line 75)	5	
Part II Taxpayer Declaration and Signature Authorization (Be s	sure you get and keep a copy of y	your return)
Under penalties of perjury, I declare that I have examined a copy of my electronic individual for the tax year ending December 31, 2018, and to the best of my knowledge and belief, they in Part I above are the amounts from my electronic income tax return. I consent to allow originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledge reason for any delay in processing the return or refund, and (c) the date of any refund. If ap Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institut of my federal taxes owed on this return and/or a payment of estimated tax, and the financial remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the at Treasury Financial Agent at <b>1-888-353-4537</b> . Payment cancellation requests must be receive date. I also authorize the financial institutions involved in the processing of the electronic answer inquiries and resolve issues related to the payment. I further acknowledge that the electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.	y are true, correct, and complete. I further dec my intermediate service provider, transmitte gement of receipt or reason for rejection of the pplicable, I authorize the U.S. Treasury and its ution account indicated in the tax preparation institution to debit the entry to this account. T authorization. To revoke (cancel) a payment, I red no later than 2 business days prior to the payment of taxes to receive confidential info	clare that the amounts er, or electronic return e transmission, <b>(b)</b> the s designated Financial a software for payment This authorization is to must contact the U.S. a payment (settlement) primation necessary to
Taxpayer's PIN: check one box only		
	o enter or generate my PIN 5 7	8 2 1
ERO firm name	Enter five	digits but

Enter five digits, but don't enter all zeros

as my signature on my tax year 2018 electronically filed income tax return.

I will enter my PIN as my signature on my tax year 2018 electronically filed income tax return. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below. Date 🕨

## Your signature

Spouse	's PIN: check	cone box c	only					
×	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN			
	ERO firm name						digits, b	but
as my signature on my tax year 2018 electronically filed income tax return.							all zer	os

I will enter my PIN as my signature on my tax year 2018 electronically filed income tax return. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ►

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Practitioner PIN Method Returns Only—continue below												
Part III Certification and Authentica	tion – Practitioner PIN Method Only								 			
ERO's EFIN/PIN. Enter your six-digit EFIN fol	llowed by your five-digit self-selected PIN.	5	8					1 all zei	3	4	5	

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2018 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Pub. 1345**, Handbook for Authorized IRS *e-file* Providers of Individual Income Tax Returns.

ERO's signature

Date

## **ERO Must Retain This Form – See Instructions** Don't Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

Filing Status:         Steps         Water of time party:         Marcel Time party:         Head of houelable         Construction         Construction <th< th=""><th>E1040</th><th>Depa U.</th><th>rtment of the Treasury—Internal Revenue</th><th></th><th>(99) <b>turn</b></th><th>20</th><th>18</th><th>OMB No.</th><th>1545-0074</th><th>IRS Use C</th><th>Dnly—Do</th><th>o not writ</th><th>e or staple in t</th><th>his space.</th></th<>	E1040	Depa U.	rtment of the Treasury—Internal Revenue		(99) <b>turn</b>	20	18	OMB No.	1545-0074	IRS Use C	Dnly—Do	o not writ	e or staple in t	his space.		
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Preparer Use Only       Firm's name ► GLOBAL TAXES LLC       Phone no.       Salt-amployed         Firm's address ► 2530 Pebble Creek Ln Currming GA 30041       Form 1040 (2018       Form 1040 (2018         Form 1040 (2018)       Pages 2       Page 2         Form 1040 (2018)       Pages 2       1       57,717.         2a       Tax-exempt interest       2a       b       b Ordinary dividends       3b         3a       dualified dividends       3a       b       b Ordinary dividends       3b         4a       IRAs, pensions, and annuites       4a       b       b Taxable amount       6b       57,717.         5a coll security benefits       5a       social security benefits       5a       5b       57,717.         5a coll security benefits       5a       social security benefits       6       57,717.         5a coll security benefits       5a       5a       social security benefits       6       57,717.         5a coll security benefits       5a       5a       social security benefits       6       57,717.         5a coll security benefits       5a       5a       coll security benefits       5a       5a         5a coll security benefits       5a       5a       coll sta secelestration on themized deduction set from l	Paid			Teparer 5 Si	griature						1 1111 5		_	t. Desimer		
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For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.       Form 1040 (2018)         Page 2         Attach Form(s)       Page 2         Attach Form(s)       Page 2         Page 2         Attach Form(s)       Page 2         Page 2 <th <="" colspan="2" td=""><td>Use Only</td><td>-</td><td></td><td></td><td></td><td></td><td></td><td></td><td>Phone no</td><td></td><td></td><td></td><td>Self-er</td><td>npioyed</td></th>	<td>Use Only</td> <td>-</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>Phone no</td> <td></td> <td></td> <td></td> <td>Self-er</td> <td>npioyed</td>		Use Only	-							Phone no				Self-er	npioyed
Form 1040 (2018)       Page 2         Attach Form(i)       1       Wages, salaries, tips, etc. Attach Form(s) W-2.       1       57, 717.         Attach Form(i)       2a       Tax-exempt Interest.       2a       b       57, 717.         2a       Qualified dividends       3a       b       Dradable amount       3b         4a       IRAs, pensions, and annutities       4a       b       Taxable amount       5b         5a       Scalar Sc								30041						0.40		
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Attach Form(i)       2a       Tax-exempt interest       2a       b       Tax-ake interest       2b         W-2. Also attach Form(i) W-2 and 1099-Ri ft ax was       4a       b       Dordinary dividends       3b         Form(i) W-2 and 1099-Ri ft ax was       IRAs, pensions, and anuities       4a       b       b       Taxable amount       4b         5a       Social security benefits       5a       5a       b       Taxable amount       4b         5b       Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22       6       6       7, 7, 7, 17.         Adjusted gross income. If you have no adjustments to income, enter the amount from line 6; otherwise, subtract Schedule 1, line 36, from line 6       7       57, 7, 17.         8       Standard deduction or temized deductions (from Schedule A)       9       10       33, 71.7         11       Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0       10       33, 71.7         10       Taxable income. Subtract lines 8 and 9 from line 1. If zero or less, enter -0       11       3, 666.         12       a Child ax credit/credit for other dependents       b Add any amount from Schedule 2 and check here       11       3, 666.         13       3, 666.       Subtract line 12 from line 11. If zero or less, enter -0.       13       3, 666	Form 1040 (2018)	)												Page <b>2</b>		
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7       Adjusted gross income. If you have no adjustments to income, enter the amount from line 6; otherwise, subtract Schedule 1, line 36, from line 6       7       57, 717.         8       Standard deduction or temized deductions (from Schedule A)       8       244,000.         9       Qualified business income deduction (see instructions).       9         10       Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0-       10       33,717.         11       a Tax (see inst.) 3, 666. (check if any from: 1    Form(s) 8814 2    Form 4972 3    -       11       3,666.         12       a Child tax credifored to rother dependents       b Add any amount from Schedule 2 and check here       11       3,666.         13       Subtract line 12 from line 11. If zero or less, enter -0-       13       3,666.       14       0.         14       Other taxes. Attach Schedule 4 .       -       13       3,666.       14       0.         15       Total tax. Add lines 13 and 14       -       15       3,666.       14       0.         16       Federal income tax withheld from Forms W-2 and 109       -       18       6,138.       17         18       Add any amount from Schedule 5       -       18       6,138.       17         18       Add lines 16 and 17. These are your total payments			,		from Sche	dule 1 line 23				• •			57	.717.		
Deduction for -       8       24,000.         • Single or married filing spontare filing f			-													
Single or married filing separately, \$12,000       9         • Married filing separately, \$12,000       10       Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0-       10       33,717.         • Married filing separately, \$12,000       11       a Tax (see inst.) 3,666. (check if any from: 1 □ Form(s) 8814 2 □ Form 4972 3 □)       10       33,717.         • b Add any amount from Schedule 2 and check here       • □       11       3,666.         • Head of household, \$13,000       a Child tax credit/credit for other dependents	Standard	)	subtract Schedule 1, line 36, from I	line 6 .							7					
filling separately, \$12,000       9       Gualified business income deduction (see instructions).       1       Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0-       10       33,717.         10       33,717.       10       33,717.       10       33,717.         11       a Tax (see inst) 3,666. (check if any from: 1 □ Form(s) 8814 2 □ Form 4972 3 □)       11       3,666.         11       a Tax (see inst) 3,666. (check if any from: 1 □ Form(s) 8814 2 □ Form 4972 3 □)       11       3,666.         12       a Child tax credit/credit for other dependents b Add any amount from Schedule 2 and check here ▶ □       11       3,666.         13       Subtract line 12 from line 11. If zero or less, enter -0-       14       0.       14       0.         14       Other taxes. Attach Schedule 4 .       .       14       0.       15       3,666.         14       Other taxes. Attach Schedule 4 .       .       15       3,666.       14       0.         15       Total tax. Add lines 13 and 14 .       .       .       15       3,666.         16       6,138.       16       6,138.       17       18       Add any amount from Schedule 5		8	Standard deduction or itemized de	ductions (fr	om Schedi	ule A)					8		24	,000.		
• Married filing jointly or Qualifying widow(ef). \$24,000       10       Taxa (see inst.) 3, 666. (check if any from: 1 □ Form(s) 8814 2 □ Form 4972 3 □) b Add any amount from Schedule 2 and check here       11       3, 666.         • Head of household, \$18,000       12       a Child tax credit/credit for other dependents subtract line 12 from line 11. If zero or less, enter -0-       b Add any amount from Schedule 3 and check here       12         • Head of household, \$18,000       13       Subtract line 12 from line 11. If zero or less, enter -0-       14       0.         • If you checked any box under Standard       14       Other taxes. Attach Schedule 4       15       7 total tax. Add lines 13 and 14       14       0.         • Federal income tax withheld from Forms W-2 and 1099       16       6,138.       17       18       6,138.         • Add any amount from Schedule 5       17       18       6,138.       19       19       2,472.         • Direct deposit?       ▶ B       Routing number       1       1       1       0       0       2       5       c Toxpe:       20a       2,472.         • Direct deposit?       ▶ B       Routing number       1       1       1       0       0       0       2       5       c Toxpe:       20a       2,472.         Direct deposit?       ▶ B	filing separately,	9	Qualified business income deduction	on (see inst	ructions) .						9					
jointly or Qualifying widow(e), \$\$24,000       11       a Tax (see inst.) 3, 666. (check if any from: 1 _ Form(s) 8814 2 _ Form 4972 3 )       11       3, 666.         12       a Child tax credit/credit for other dependents b Add any amount from Schedule 2 and check here       12       12         13       Subtract line 12 from line 11. If zero or less, enter -0-       13       3, 666.         14       Other taxes. Attach Schedule 4		10	Taxable income. Subtract lines 8 ar	nd 9 from li	ne 7. lf ze	ro or less, e	nter -0-		<u> </u>		10		33	,717.		
\$24,000   • Head of household, \$18,000   • Head of household, \$18,000   • If you checked any amount from Schedule 2 and check here	jointly or Qualifying	11	a Tax (see inst.) 3,666. (check i	if any from:	1 🗌 Fori	m(s) 8814	2 🗌 Form	n 4972 <b>3</b>	□	)	1					
• Head of household, \$12       a Child tax credit/credit for other dependents b Add any amount from Schedule 3 and check here ▶       12         13       Subtract line 12 from line 11. If zero or less, enter -0-       13       3,666.         14       Other taxes. Attach Schedule 4.       14       0.         15       Total tax. Add lines 13 and 14       15       3,666.         16       Federal income tax withheld from Forms W-2 and 1099       16       6,138.         17       Refundable credits: a EIC (see inst.)       b Sch. 8812       c Form 8863         Add any amount from Schedule 5       17       18       6,138.         Add lines 16 and 17. These are your total payments       18       6,138.         19       If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid       19         20a       Amount of line 19 you want refunded to you. If Form 8888 is attached, check here       19         20a       2,472.         20a       2,472.         20a       2,472.         20a       Account number       1         13       1       0         14       0       1         15       3,666.       1         16       6,138.       1         17			<b>b</b> Add any amount from Schedule 2	2 and check	khere .						11		3	,666.		
\$18,00013Subtract line 12 from line 11. If zero or less, enter -0-133,000.• If you checked any box under Standard deduction, see instructions.14Other taxes. Attach Schedule 4140.15Total tax. Add lines 13 and 14153,666.140.16Federal income tax withheld from Forms W-2 and 1099153,666.16Federal income tax withheld from Forms W-2 and 1099166,138.17Refundable credits: a EIC (see inst.)b Sch. 88121718Add any amount from Schedule 5171819If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid1920aAmount of line 19 you want refunded to you. If Form 8888 is attached, check here1920aAmount of line 19 you want applied to your 2019 estimated tax21Amount You Owe22Amount of line 18 from line 15. For details on how to pay, see instructions21	Head of	12	a Child tax credit/credit for other depende	ents		<b>b Add</b> any	amount fro	m Schedule	3 and check I	nere 🕨 🗌	12					
any box under Standard deduction, see instructions.15Total tax. Add lines 13 and 14153,666.16Federal income tax withheld from Forms W-2 and 1099166,138.17Refundable credits: a EIC (see inst.)b Sch. 8812c Form 886317Add any amount from Schedule 51718Add lines 16 and 17. These are your total payments1819If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid1920aAmount of line 19 you want refunded to you. If Form 8888 is attached, check here20a21Amount of line 19 you want applied to your 2019 estimated tax21Amount You Owe22Amount of line 18 from line 15. For details on how to pay, see instructions22		13	Subtract line 12 from line 11. If zero	o or less, er	iter -0						13		3	,666.		
Standard deduction, see instructions.       15       Total tax. Add lines 13 and 14       15       3,666.         16       Federal income tax withheld from Forms W-2 and 1099       6       6       16       6,138.         17       Refundable credits: a EIC (see inst.)       b Sch. 8812       c Form 8863       16       6,138.         18       Add any amount from Schedule 5       17       18       6,138.       17         18       Add lines 16 and 17. These are your total payments       18       6,138.       19       19       2,472.         20a       Amount of line 19 you want refunded to you. If Form 8888 is attached, check here       19       2,472.         20a       Account number       1       1       1       0       0       2       5       c Type:       Checking       Savings         21       Amount of line 19 you want applied to your 2019 estimated tax       21       22       22       22		14	Other taxes. Attach Schedule 4 .								14			0.		
See instructions.       16       Federal income tax withheld from Forms W-2 and 1099       1099       11       16       6,138.         Refundable credits: a EIC (see inst.)       b Sch. 8812       c Form 8863       17         Add any amount from Schedule 5         Add any amount from Schedule 5         17         18       Add lines 16 and 17. These are your total payments       18       6,138.         18       Add lines 16 and 17. These are your total payments       18       6,138.         18       Add lines 16 and 17. These are your total payments       18       6,138.         20a       Amount of line 19 you want refunded to you. If Form 8888 is attached, check here       19       2,472.         20a       2,472.      <	Standard	15	Total tax. Add lines 13 and 14 .								15		3	,666.		
17       Refundable credits: a EIC (see inst.)       b Sch. 8812       c Form 8863       17         Add any amount from Schedule 5       17         18       Add lines 16 and 17. These are your total payments       18       6,138.         19       If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid       19       2,472.         20a       Amount of line 19 you want refunded to you. If Form 8888 is attached, check here       19       2,472.         20a       Account number       1       1       1       0       0       2       5       b c Type:       Checking       Savings         21       Amount of line 19 you want applied to your 2019 estimated tax       21       Amount of line 19 you want applied to your 2019 estimated tax       21       22		16	Federal income tax withheld from F	Forms W-2	and 1099						16		6	,138.		
Add any amount from Schedule 5       17         18       Add lines 16 and 17. These are your total payments       18       6,138.         Refund       19       If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid       19       2,472.         20a       Amount of line 19 you want refunded to you. If Form 8888 is attached, check here       •       •       19       2,472.         Direct deposit?       •       b       Routing number       1       1       1       0       0       2       5       • c Type:       Checking       Savings         •       1       Account number       4       8       0       7       2       4       6       6       0       5       •         21       Amount of line 19 you want applied to your 2019 estimated tax       •       21       22       22		J <sub>17</sub>	Refundable credits: <b>a</b> EIC (see inst.)		<b>b</b> So	ch. 8812 _		c Forr	n 8863							
18       Add lines 16 and 17. These are your total payments       18       6,138.         Refund       19       If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid       19       19       2,472.         20a       Amount of line 19 you want refunded to you. If Form 8888 is attached, check here       •       19       2,472.         Direct deposit?       •       b       Routing number       1       1       1       0       0       2       5       • c Type:       Checking       Savings         •       •       1       1       1       0       0       2       5       • c Type:       Checking       Savings         •       •       1       1       1       0       0       2       5       • c Type:       Checking       Savings         •       •       1       1       1       0       0       0       2       5       • c Type:       Checking       Savings         •       1       Account number       4       8       0       7       2       4       6       6       0       5       1       1       2         Amount of line 19 you want applied to your 2019 estimated tax       •       2											17					
20a       Amount of line 19 you want refunded to you. If Form 8888 is attached, check here       .		18									18		6	,138.		
20a       Amount of line 19 you want refunded to you. If Form 8888 is attached, check here       .	Refund	19									19		2	,472.		
Direct deposit?       b       Routing number       1       1       1       0       0       0       2       5       b c Type:       Checking       Savings         b       Account number       4       8       0       7       2       4       6       6       0       5       1       1         21       Amount of line 19 you want applied to your 2019 estimated tax       .       >       21       21       21         Amount You Owe       22       Amount you owe. Subtract line 18 from line 15. For details on how to pay, see instructions       .       .       >       22	neiuliu															
See instructions.				1 1 1		1 1		_	ing 🗌	Savings						
21       Amount of line 19 you want applied to your 2019 estimated tax       . ▶       21         Amount You Owe       22       Amount you owe. Subtract line 18 from line 15. For details on how to pay, see instructions       . ▶       22	See instructions.		-									1				
Amount You Owe 22 Amount you owe. Subtract line 18 from line 15. For details on how to pay, see instructions								1	. :	_		1				
	Amount You Owe		· · · · ·	•					ons	. ►	22			,		
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Go to *www.irs.gov/Form1040* for instructions and the latest information.

Form <b>W-7</b>					
(Rev. September 2016)					
Department of the Treasury Internal Revenue Service					
An IRS individual tax					

## Application for IRS Individual Taxpayer Identification Number

For use by individua	Is who are not U.S. citizens or permanent residents.
	See separate instructions.

ayer identification number (ITIN) is for federal tax purposes only.	Application Type (Check one box):

Before you begin:	Application Type (encord one
• Don't submit this form if you have, or are eligible to get, a U.S. social security number (SSN).	☑ Apply for a New ITIN
• Getting an ITIN doesn't change your immigration status or your right to work in the United States	Renew an Existing ITIN

and doesn't make you eligible for the earned income credit.

Reason you're submitting Form W-7. Read the instructions for the box you check. Caution: If you check box b, c, d, e, f, or g, you must file a U.S. federal tax return with Form W-7 unless you meet one of the exceptions (see instructions).

**a** Nonresident alien required to get an ITIN to claim tax treaty benefit

**b** Nonresident alien filing a U.S. federal tax return

c 🗌 U.S. resident alien (based on days present in the United States) filing a U.S. federal tax return

<b>d</b> Dependent of U.S. citizen/resident alien	Enter name and SSN/ITIN of U.S. citizen/resident alien (see instructions) ▶ 793-45-7821
e	HARIKRISHNA JADDA

f 🗌 Nonresident alien student, professor, or researcher filing a U.S. federal tax return or claiming an exception

· ·	spouse of a nonresident alien holding a U	S. visa							
h Other (see in Additional in	formation for <b>a</b> and <b>f</b> : Enter treaty country		and treaty article						
Name (see instructions)	1a First name SIVAKUMARI	Middle name	,	Last name NAGUBADI					
Name at birth if different ►	1b First name	Middle name		Last name					
Applicant's	2 Street address, apartment number, 7575 FRANKFORD RD Apt	1822	-		uctions.				
mailing address	City or town, state or province, and DALLAS		TX	USA	75252				
Foreign (non- U.S.) address (if different from	<b>3</b> Street address, apartment number,	or rural route number. <b>D</b>	)on't use a P.O. box	number.					
above) (see instructions)	City or town, state or province, and	country. Include ZIP co	de or postal code whe	ere appropriate.					
Birth information	4 Date of birth (month / day / year) Coun 07/06/1992 IND	try of birth IA	City and state or pro		☐ Male ▲ Female				
Other information		reign tax I.D. number (i 14169	f any) 6c Type of U H4	• • •	er, and expiration date 08/09/2020				
	6d Identification document(s) submitted USCIS documentation			Date of entry into United States					
	<ul> <li>6e Have you previously received an ITIN or an Internal Revenue Service Number (IRSN)?</li> <li>X No/Don't know. Skip line 6f.</li> <li>Yes. Complete line 6f. If more than one, list on a sheet and attach to this form (see instructions).</li> </ul>								
	6f Enter ITIN and/or IRSN ► ITIN		IRSN		and				
	name under which it was issued $\blacktriangleright$ _	First name	Middle name	L	ast name				
	6g Name of college/university or compo City and state	any (see instructions)	Length of stay	/					
Sign Here	Under penalties of perjury, I (applicant/del documentation and statements, and to the information with my acceptance agent in order	best of my knowledge a	nd belief, it is true, cor	rect, and complete. I a	uthorize the IRS to share				
	Signature of applicant (if delegate, s	see instructions)	Date (month / day / yea	r) Phone number					

Keep a copy for your records.	Name of delegate, if applicable (type or print)		Delegate's relations to applicant	ship	Parent     Parent      At	Court-appointed guardian torney
Acceptance Agent's	Signature		Date (month / day / year)		Phone Fax	
Use ONLY	Name and title (type or print) Name of c		ompany	EIN		PTIN
				Office	Code	

REV 10/17/18 PRO